



Performance Results State Fiscal Year 2013

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INTRODUCTION FROM DIRECTOR HARVEY

Reviewing and analyzing Fiscal Year 2013 performance planning and results help the Department improve decision making and accountability to the citizens of Iowa. We are pleased to present the SFY'2013 (July 1, 2012 - June 30, 2013) Performance Results Report for the Iowa Department on Aging. The report contains information about the services the Department and its partners provided to older Iowans. The focus is on results and aligns with the requirements of Iowa's Accountable Government Act, which requires Iowa state government to adopt strategic planning, agency performance planning, performance measurement and reporting, and performance audits. The report compares the Department's performance results to projected performance targets, describes challenges, and highlights major accomplishments.

Summary: In SFY'2013, Iowa's 13 Area Agencies on Aging (AAAs) were responsible for tracking and reporting the services provided to Iowans 60+ funded by the Federal Older Americans Act through the Administration for Community Living/Administration on Aging (AoA) and funded in part by state general fund dollars. The data reported includes the number of older Iowans served and the number of service units provided. Over 491,000 units of home and community based services were provided to older Iowans representing approximately 37 different services.ⁱ

In SFY 2013, the data collected for registered clients aged 60+ served indicated that 68 percent were female, 32 percent were male and 55 percent lived alone. Sixty-two percent lived in rural areas. A more detailed look at the consumer profile reveals that 60 percent were 75 years of age or older while 26 percent were 85 years of age or older.ⁱⁱ

The great majority of Iowans age 60 and older have a strong desire to live safely and independently in their own homes and communities. This is not surprising given the fact that 76% of Iowans age 65 and over were born in Iowa and, therefore, likely to feel a strong connection to their Iowa roots.ⁱⁱⁱ In order to remain in the setting of their choice, however, older Iowans need information about and access to affordable long-term living and community supports that help them age in place. In SFY 2013 the Department, through the AAAs and their service providers (commonly called the Iowa Aging Network) provided 94,792 individual contacts to older Iowans regarding information and assistance, and served 60,351 clients for which registration was collected using the Iowa Program Reporting System (IAPRS) under the Federal Older Americans Act (OAA) and associated state funded services.^{iv} Registered services include case management, chore, assisted transportation, home delivered and congregate meals, personal home health care and homemaker, respite, and adult day services.

A total of 8,679 clients were served by the Case Management Program for Frail Elders (CMPFE) in SFY'2013 resulting in 64,144 hours of assistance to older persons and their caregivers in the form of access to or care coordination. The program's greatest impact, however, is the fact that CMPFE clients were able to maintain their independent living status for 41 months before leaving the program.^v CMPFE, for the majority of clients, also provided access to the Department of Human Services Medicaid Elderly Waiver program. Older adults in the Waiver program had health needs and financial situations which qualified them for facility based care under Medicaid.

During SFY'2013, the Department continued to expand initiatives to improve, analyze and utilize its significant data sources while moving in the direction of selecting performance measures based upon existing processes and reporting mechanisms. These efforts enabled AAAs to better report desired performance outcomes.

Key Accomplishments

- In order to meet legislative mandates, the Department completed the process of reducing thirteen AAAs to six. This activity represented the single largest transformation of Iowa's aging network since its inception in 1966. The Department successfully completed the redesign on July 1, 2013. The Department's and AAA's efforts focused on the seamless continuity of services to older Iowans through the transition and on the safe and orderly transfer of records, assets, goods, and services.

- The Department secured partnerships with Iowa Medicaid Enterprise (IME), the Iowa Department of Transportation (DOT), and the AAAs to expand the Aging and Disability Resource Center (ADRC) network statewide. The Department, IME, and DOT are working to create a robust, online portal through which Iowans can find information about the many private and public long-term support and service options available. SF446 designated the six AAAs as ADRCs to serve as highly visible, local points of contact where Iowans with disabilities aged 18 and over, older Iowans age 60 and over, and their caregivers can obtain information on the full menu of long-term living and community support services.
- An Elder Abuse Task Force studied the issues surrounding elder abuse, neglect, and exploitation in Iowa to provide remedies. The task force completed its work and recommended an elder abuse law and the implementation of a system focused on the prevention, intervention, detection, and provision of services to maintain the health, welfare, safety, and resources of older Iowans. Additional work on this issue will continue throughout SFY'2014.

Older Iowans are an asset to our State as employees, volunteers, caregivers, mentors, and in the many other ways they contribute to the strength of our State. Annually, Social Security retirement benefits alone contribute in excess of \$5 billion to the Iowa economy. Because the majority older Iowans tend to stay put when they retire, they provide vital anchors to families and rural communities.^{vi} They are home owners and through property taxes support schools and education, counties and municipalities. As the population ages, we must recognize older Iowans as a valuable resource while providing services and long-term living and community supports needed by older adults, their families and caregivers.

The Department finds great strength in its employees and the AAAs who collectively demonstrate a history of pulling together to get the job done for the Iowans they serve. Together, we strive to meet our Mission to develop a comprehensive, coordinated and cost-effective system of long-term living and community supports to provide older Iowans and their caregivers with the information, resources and support they deserve and need to lead productive, vital and dignified lives.

Sincerely,
Donna K. Harvey, Director
Iowa Department on Aging

VISION STATEMENT

Building the best place to live healthier, longer.

MISSION STATEMENT

The mission of the Iowa Department on Aging is to develop a comprehensive, coordinated and cost-effective system of long-term living and community supports that help individuals maintain health and independence in their homes and communities.

CORE FUNCTIONS

Advocacy: Advocate for changes in public policy, practices and programs that empower older Iowans, facilitate their access to services, protect their rights and prevent abuse, neglect, and exploitation. Activities may include legislative advocacy, information dissemination, outreach and referral, research and analysis and coalition building.

Health and Support Services: Support policies, programs, and wellness initiatives that empower older Iowans to stay active and healthy, and that improve their access to affordable, high quality long-term living and community supports.

Planning, Development and Coordination: Conduct planning, policy development, administration, coordination, priority setting, and evaluation of all state activities related to the objectives of the federal Older Americans Act.

AGENCY OVERVIEW

Agency Structure and Services: The Iowa Department on Aging is a department within the executive branch of Iowa state government, established by Iowa Code Chapter 231, and it is the designated State Unit on Aging (SUA) under the Federal Act. The Federal Act, administered by the U. S. Administration on Aging (AoA) under the governance of the U. S. Department of Health and Human Services, outlines specific requirements for states to establish planning and service areas (PSAs) as well as Area Agencies on Aging (AAAs) to carry out the Federal Act requirements. The SUA is then required to ensure compliance with federal statute and regulations as well as any state or administrative code. Under both the Federal Act and the Elder Iowans Act, the Department has the responsibility to serve as an effective and visible advocate for older individuals. This is accomplished by review and comment upon state plans, budgets, and policies that affect older individuals, and by providing technical assistance to any agency, organization, association, or individual representing the needs of older individuals. The Department develops, submits and administers a State Plan on Aging under the Federal Act in cooperation with AoA. Under federal law, the Department is responsible for the planning, policy development, administration, coordination, priority setting, and evaluation of all state activities related to the objectives of these acts along with administering dozens of other associated activities.

The Department works to ensure that a comprehensive, coordinated and cost-effective system of long term living and community support services is provided to older Iowans, their caregivers, and with increasing frequency, persons living with disabilities. The Department has 7 citizen and 4 legislative Commissioners and for SFY'2013, had thirty-eight authorized Full Time Employees (FTEs) of which most were filled for the fiscal year. Eleven of the Department's thirty-eight employees are charged with carrying out the duties of the Office of the Long Term Care Ombudsmen whose role is to ensure the rights of long term care facility and assisted living residents. All staff members were housed in the Des Moines, Iowa office located at the Jessie Parker Building, 510 East 12th Street, Suite 2, Des Moines, Iowa 50319.

Partners in achieving the Department's vision and mission include Commission members, AAAs, and a variety of other public and private sector organizations. The Department collaborates extensively with the departments of Human Services, Public Health, and Inspections and Appeals on many long-term care policies and program issues. The Department also partners with Iowa Workforce Development and the Iowa Department of Transportation. These partnerships are the cornerstone for enhancing a comprehensive and coordinated delivery system for older persons and their families. Components of this long-term care system include creating a safe environment, making services accessible and providing alternatives and balance between institutional and non-institutional services. The Department exists to advocate for and respond to the needs of an aging society by planning, promoting and coordinating a continuum of accessible and affordable services and choices for older Iowans. The Department provides leadership to both empower and enhance the lives of older persons through choices, services, protection and respect. As Iowa's aging population continues to increase, Iowa must be prepared to meet older Iowans' changing needs while being cognizant of the effects on families and communities.

Population Served. The estimated number of Iowans aged 60 and over is 613,322 or 20.23 percent of Iowa's total population of approximately 3,062,309.^{vii} Iowans aged 65 and older are one of the fastest growing population groups in Iowa. In 2011, 14.9 percent of Iowans were 65 years of age or older. By 2020, the percent will grow to approximately 18 percent and by 2030 nearly 21 percent of Iowa's total population is projected to be aged 65 or older. According to Iowa's State Data Center, 20 percent of residents in 83 of Iowa's 99 counties will be 65 years of age or older in 2040 compared to 30 counties in 2000.^{viii}

In SFY 2013, 62 percent of older Iowans served lived in rural areas, and 18 percent of all older Iowans served lived below the federal poverty income level.^{ix} Target populations included older Iowans living in rural communities, low-income and minority individuals, and individuals with limited English proficiency. Adults with physical and developmental disabilities and adults with mental and behavioral health concerns were served by the Department and the aging network as were caregivers caring for individuals with Alzheimer's disease and dementia.

Services, Programs and Activities. The Department maintains statutory and contractual relationships with the network of six AAAs, which provide services to older Iowans in six PSAs within the state. Each AAA has at least one full-service office. Together with the local AAAs and their service providers, 37 different services were provided to support individuals in their homes and communities. The types of services, programs and activities included:

- Advocacy on behalf of older Iowans;
- Education, training and public awareness regarding older adult issues including enhanced access to public benefits;
- Home and Community Based Services and Case Management;
- Nutrition programs and services;
- Elder Abuse Awareness and prevention activities;
- Older Worker training and employment activities;
- Long Term Care Ombudsman Office and Resident Advocate Committees on behalf of residents of licensed and certified long term care facilities;
- Development of grants and grant management; and
- Monitoring, accountability & assessment.

Through two comprehensive web sites and other methods, the Department provides customer access to information 24 hours a day, seven days a week. The web sites are found at: www.iowaaging.gov and www.lifelonglinks.org.

AGENCY PERFORMANCE RESULTS

CORE FUNCTION: ADVOCACY

Description: Advocate for changes in public policy, practices and programs that empower older Iowans, facilitate their access to services, protect their rights and prevent abuse, neglect, and exploitation. Activities may include legislative advocacy, information dissemination, outreach and referral, research and analysis and coalition building.

Service: Aging & Disability Resource Center (ADRC) Information & Access

Description: Iowans need consistent and reliable information to make informed decisions about long-term supports and services. Iowa's ADRC system will be highly visible and trusted networks where consumers and caregivers can obtain information on the full menu of long-term living and community support services. The ADRC model will include a virtual component and a coordination systems component. Currently, ADRC services are available in seventeen of Iowa's ninety-nine counties with plans to expand statewide during calendar years 2014 and 2015. (Link to Strategic Plan Goal 1.1: Expand ADRC network statewide to ensure all Iowans have access to and continuity of services.)

Why we are doing this: The ADRC project is designed to empower individuals to make informed choices, streamline access to supports and services, minimize consumer confusion, and enhance individual choice. The statewide ADRC network will also enable policy makers and program administrators to effectively respond to individual needs, address system problems, and limit the unnecessary use of high-cost services. The ADRC network will become a primary source of information about the Older Americans Act core programs and other support services for older Iowans and family caregivers.

What we're doing to achieve results: Department staff are pursuing the following activities to implement the ADRC network statewide:

- Working with local and regional partners to develop six ADRC networks within each Area Agency on Aging region and ensure ongoing sustainability of the network.;
- Developing partnerships with healthcare networks and organizations working with veterans, persons with behavior health, intellectual and physical disabilities, and persons who are dual eligible;
- Providing technical assistance and training to support the development of ADRC core pillars within each ADRC network;
- Utilizing a standard evaluation process to assess effectiveness and identify efficiencies with the ADRC;
- Developing a monitoring schedule to review the networks for their compliance.

Results

| Performance Measure | Performance Target | Performance Actual |
|--|--------------------|--------------------|
| Percent increase in ADRC networks developed. | 25% | 33% |

What Happened: Legislation passed in 2013 designated all six area agencies on aging to be ADRCs. Through a joint planning retreat, department and AAA staff planned the process for completing the ADRC designation process through a readiness review with site visits, securing designation as part of the area plan, and identifying supports for the area agencies to implement ADRC services.

Data Source: ADRC project director

Resources: Funding for this program is \$199,758 from a HHS-Administration for Community Living discretionary grant.

Service: Long Term Care Ombudsman (LTCO)

Description: The mission of the Office of State Long-Term Care Ombudsman is to protect the health, safety, welfare, and rights of individuals residing in long-term care by investigating complaints, seeking resolutions to problems, and providing advocacy with the goal of enhancing quality of life and care. (Link to Strategic Plan Goal 3.2: Expand and strengthen capacity of Long-Term Care Ombudsmen)

Why we are doing this: In 1978, the Older Americans Act mandated a State Long-Term Care Ombudsman office in each state. The purpose of the office is to improve the quality of life and care in long-term care facilities by assisting residents to resolve complaints about the care they receive and to assure that residents' civil and human rights are protected.

What we're doing to achieve results: Iowa's long-term care ombudsmen investigate to help resolve resident and family concerns, provide information and assistance to long-term care providers, offer educational programs to the community, volunteers and long-term care staff, and provide individual consultation on issues important to residents, their families or the public. Long-term care ombudsmen also assist with resident and family councils within long-term health care facilities. The internal processes of the office are continually reviewed for effectiveness and efficiency, and the state, local and volunteer long-term care ombudsmen participate in frequent training.

Results

| Performance Measure | Performance Target | Performance Actual |
|---|--------------------|--------------------|
| Percent of long-term care facilities with a volunteer LTCO. | 10% | 0% |

What Happened: The Office is transitioning from the long-standing but unfunded resident advocate program to the new certified volunteer program. Under this program, volunteers will be available to perform monitoring visits to assist in resolving basic residents' concerns. This program will allow the local Long-Term Care Ombudsman to focus on complaints involving the health, safety, welfare, and rights of residents.

The Office of State Long Term Care Ombudsman, through SF 2336, was able to hire a volunteer ombudsman coordinator to develop a certified volunteer long-term care ombudsman program. A second volunteer ombudsman coordinator was hired and started at the end of September 2013. One coordinator is charged with recruiting, screening, processing applications and providing technical support to the certified volunteers. The other coordinator develops and refines policies and procedures, conducts trainings and presents information on the program to facility staff, community groups and potential volunteers.

Iowa has 541 facilities that need volunteer long-term care ombudsmen. As of 6/30/13, six volunteers were in various stages of the certification process.

Data Source: Office of State Long Term Care Ombudsman

Resources: Funding for this program is \$210,000 which comes from the State of Iowa general fund.

CORE FUNCTION: HEALTH & SUPPORT SERVICES

Description: Support policies, programs, and wellness initiatives that promote healthy lifestyles for older lowans and that improve their access to affordable, high quality long-term living and community supports.

Services: Healthy Aging

Description: As older lowans age, many require support services to maximize their health and independence allowing them to remain in their homes and communities. The Iowa Department on Aging, the six Area Agencies on Aging and their community networks provide these support services including congregate and home delivered meals, nutrition education and nutrition counseling, and health promotional information and programs. A variety of home and community based services are available such as coordination of services through case management and transportation to support older lowans in meeting their goal to remain in their own homes. (Strategic Plan Goal 2.3: Promote policies and planning with pragmatic methods to create a balance with innovative and creative ideas at the local level)

Why we are doing this: To help older lowans stay healthy, active and independent. The Older American Act (OAA) funds supporting the nutrition and health promotion programs are to be used to reduce hunger and food insecurity, promote socialization and promote health and well-being of older individuals by assisting them to access nutrition and other disease prevention and health promotion services to delay the onset of adverse health conditions resulting from poor nutritional health and sedentary behavior.

What we're doing to achieve results: The Department provides OAA and state funding to the Iowa's area agencies on aging (AAA). The AAAs and their community networks provide home and community based services including congregate and home delivered meals, nutrition education and nutrition counseling, transportation and evidence-based health promotion programs. Department staff provides technical assistance to the AAAs to help meet the objectives of the OAA and older lowan's goals for independent living. Staff also reviews program performance and monitor compliance with federal and state regulations.

Results

| Performance Measure | Performance Target | Performance Actual |
|--|--------------------|--------------------|
| Percent of decrease in total impairments related to Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs) for high nutrition risk meal participants. | 75% | 80% |

What Happened: In SFY 2013, over 2.7 million congregate and home delivered meals were provided to 45,975 older lowans. Nutritious meals and the socialization of the OAA nutrition program contributed to positive outcomes for meal participants. Nutrition risk screening results of the nutrition program participants demonstrated that 21 percent of congregate meal participants were at high nutrition risk of which 62 percent improved their nutrition risk score. Of the home delivered meal participants, 53 percent were at high nutrition risk of which 53% improved their nutrition risk score. Overall 80 percent improved or maintained their nutrition risk scores. Measurements of Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs) reflecting ability for self-care improved for both high nutrition risk congregate and home delivered meal participants thus meeting performance target.

Data Source: Iowa Program Reporting System (IAPRS)

Resources: Funding for this program is a combination of Federal Older Americans Act Title IIIC(1) \$4,089,781 and IIIC(2) \$2,306,915, Nutrition Services Incentive Program \$1,986,994, State General Funds \$2,033,465, and other \$8,063,380 totaling \$18,480,535.

Results, continued

| Performance Measure | Performance Target | Performance Actual |
|---|---------------------------|---------------------------|
| Percentage of CMPFE case managers, family caregiver specialists, and options counselors trained to identify mental health issues. | 25% | 0% |

What Happened: The Department recognized the need for aging network professionals to obtain information about efficient and effective mental health services for older and disabled Iowans. The federal Substance Abuse and Mental Health Services Administration (SAMHSA) was identified as a funding source for training these professional on the available mental health services and best practices. Together with the Department of Public Health and the Department of Human Services, the Department began to pursue a curriculum and trainers for this effort. Unfortunately, the SAMSHSA federal funding, upon which the training was dependent, was cut. The three agencies attempted to purse the training without the federal dollars. However, the training effort was suspended as a result of the state’s mental health redesign. The Department continues to recognize the need for information and training on mental health issues and is pursuing alternate activities to educate aging professionals on these issues.

Data Source: Not Applicable.

Resources: None.

CORE FUNCTION: PLANNING, DEVELOPMENT AND COORDINATION

Description: Conduct planning, policy development, administration, coordination, priority setting, and evaluation of all state activities related to the objectives of the federal Older Americans Act (OAA).

Activity: Oversight & Operations

Description: The Department is responsible for the application and receipt of OAA funds as well as state appropriations. The Department is a focal point for all activities related to the needs and concerns of older Iowans. Staff serve as advocates for older persons by:

- Reviewing and commenting upon all state plans, budgets, and policies that affect elders.
- Providing technical assistance to any agency, organization, association, or individual representing the needs of elders.
- Assuring that preferences for services will be given to older individuals with greatest economic or social needs.
- Assuring that preference for services will be given to low-income minority and rural older adults.

Staff review mandated program and financial reports from the AAAs in order to evaluate the effectiveness of OAA programs in meeting the needs of older Iowans. As part of its effort to modernize the aging network, the Department has been working to update its data collection tools to facilitate reporting. (Link to Strategic Plan Goal 2.1: Expand data sharing among state agencies, aging services, health care and other strategic partners to identify high risk older adults and family caregivers, and Goal 4.2: Modernize the Department on Aging infrastructure.)

Why we are doing this: The Department is expanding data sharing among state agencies and other aging network partners to better identify high risk older adults and family caregivers.

What we're doing to achieve results: Department staff worked with the Department of Administrative Services - Iowa Technology Enterprises to create a stable, web based single-entry point reporting system for the AAAs to submit mandated program and financial data. The change in reporting platform will in result in streamlined data collection activities.

Results

| Performance Measure | Performance Target | Performance Actual |
|--|--------------------|--------------------|
| Percent of implementation of Iowa Program Reporting System (IAPRS) & Iowa Financial Reporting Services (IAFRS) electronic reporting system redesign. | 100% | 85% |

What Happened: The Department converted both its program and financial reporting systems from stand-alone, pc-based systems to a single, web based reporting system. As of 6/30/2013, the web based application was complete and testing was underway. The IAPRS & IAFRS web-based reporting system became available for AAAs use on 10/14/2013.

Resources: Funding for this effort comes from Iowa Access totaling \$330,000.

CORE FUNCTION: RESOURCE MANAGEMENT

Activity: Annual Management

Description: In state fiscal year 2013, the Department employed thirty-eight FTEs. Due to staff retirements, approximately 40 percent of Department personnel have less than two-year's experience working at the agency.

In addition, legislative activities in 2011 and 2012 resulted in the restructuring Iowa's aging network by consolidating thirteen area agencies on aging into six. Throughout SFY 2013, Department management and fiscal staff developed new policies and procedures to assist the six remaining AAAs in expanding their operations.

Why we are doing this: To ensure effective administration of the Department on Aging.

What we're doing to achieve results: Management staff trained and provided support to Department and AAA staff on contracting rules, procurement policies, match requirements, and other financial matters to ensure compliance.

Results

| Performance Measure | Performance Target | Performance Actual |
|---|--------------------|--------------------|
| Revenues available through IDA programs and state aging services. | \$27,829,196 | \$27,364,070 |

What Happened: Revenue was slightly less than projected for the fiscal year.

Data Source: Iowa Financial Reporting Services (IAFRS)

Resources: Funding for the Department and the AAAS comes from a combination of federal Older Americans Act appropriations, state general funds, and other sources.

RESOURCE REALLOCATION

In SFY'2013, the Iowa Department on Aging did not reallocate any resources.

AGENCY CONTACT

Copies of the Iowa Department on Aging *Performance Results Report* are available on the IDA Web site at www.iowaaging.gov or email Shan Sasser at the Department on Aging: Shan.Sasser@iowa.gov.

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ⁱ INAPIS (Iowa National Aging Program Information System), *State Fiscal Year 2013 Activity Report* (Des Moines, IA, 2013), 2. <http://www.iowaaging.gov>

ⁱⁱ Ibid, 2.

ⁱⁱⁱ State Data Center of Iowa. (May 2013). *Fact Sheet: Older Iowans: 2013*, U.S. Census Bureau, U.S. Census Bureau, American Community Survey, 2011; Woods & Poole Economics, Inc. 2013, 4. census@lib.state.ia.us

^{iv} INAPIS, 4.

^v Results Iowa – Accountability for Iowa. *Department Performance - Aging*. 07/26/2013. Iowa Department of Management. Accessed 11/22/2013. <<http://www.resultsiowa.org/elder.html>>.

^{vi} State Data Center of Iowa, 2.

^{vii} U.S. Census Bureau, Table DP05: ACS DEMOGRAPHIC AND HOUSING ESTIMATES (2007-2011 American Community Survey 5-Year Estimates)

^{viii} State Data Center of Iowa, 4.

^{ix} INAPIS, 2.